

Attorney Docket No. 042390.P12239

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:)
Miller, et al.)
Application No: 09/930,023)
Filed: August 14, 2001)
For: PROXIMITY DETECTION FOR ACCESS)
CONTROL)
Examiner: Not Yet Assigned
Art Unit: 2635

Box Non-Fee Amendment
Commissioner For Patents
Washington, D.C. 20231

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PRELIMINARY AMENDMENT

Dear Sir:

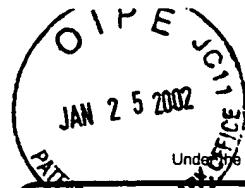
Prior to examining the present U.S. Patent application, please enter this amendment and consider the following remarks.

IN THE CLAIMS

All pending claims are presented in clean, un-marked format for the Examiner's convenience.

1. An electronic device comprising:
 - a detection circuit to detect whether a predetermined device is within a predetermined proximity of the electronic device; and
 - a control circuit to cause the electronic device to be in a first state when the predetermined device is within the predetermined proximity and to cause the electronic

HGA
4/12/02
July



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PTO/SB/21 (12/97)
Approved for use through 9/30/2000. OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

AO

TRANSMITTAL FORM

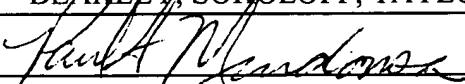
(to be used for all correspondence after initial filing)

		Application No.	09/930,023
		Filing Date	August 14, 2001
		First Named Inventor	Brett E. Miller
		Group Art Unit	2635
		Examiner Name	Not Assigned
Total Number of Pages in This Submission		Attorney Docket Number	42390P12239

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> - Preliminary Amendment - Return Receipt Postcard </div>
<div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> RECEIVED FEB 04 2002 Technology Center 2600 </div>		
<div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> Remarks </div>		

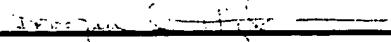
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Paul A. Mendonsa, Reg. No. 42,879 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	December 17, 2001

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class mail with sufficient postage in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on:

December 17, 2001

Typed or printed name	Deborah L. Higham		
Signature		Date	December 17, 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT **(\$)** **0.00**

Complete if Known

Application No.	09/930,023
Filing Date	August 14, 2001
First Named Inventor	Brett E. Miller
Examiner Name	Not Assigned
Group/Art Unit	2635
Attorney Docket No.	42390P12239

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **02-2666**

Deposit Account Name **Blakely, Sokoloff, Taylor & Zafman LLP**

Charge Any Additional Fee(s) Required
Under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

Applicant claims small entity status.
See 37 CFR 1.27.

2. Payment Enclosed:

Check Credit card Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee	Fee	Fee	Fee Description	Fee Paid
Code	Code	(\\$)	Code	(\\$)		
101	740	201	370	Utility filing fee		
106	330	206	165	Design filing fee		
107	510	207	255	Plant filing fee		
108	740	208	370	Reissue filing fee		
114	160	214	80	Provisional filing fee		
SUBTOTAL (1)		(\\$)				

2. EXTRA CLAIM FEES

	Extra Claims	Fee from below	
Total Claims	33 - 35 = 0	X 18.00 =	\$0.00
Independent Claims	6 - 7 = 0	X 84.00 =	\$0.00

Multiple Dependent

Large Entity	Small Entity	Fee	Fee	Fee	Fee Description	Fee Paid
Code	Code	(\\$)	Code	(\\$)		
103	18	203	9	Claims in excess of 20		
102	84	202	42	Independent claims in excess of 3		
104	280	204	140	Multiple Dependent claim, if not paid		
109	84	209	42	**Reissue independent claims over original patent		
110	18	210	9	**Reissue claims in excess of 20 and over original patent		
SUBTOTAL (2)		(\\$)		0.00		

**or number previously paid, if greater. For Reissues, see below

FEE CALCULATION (continued)

3. ADDITIONAL FEE

Large Entity	Small Entity	Fee	Fee	Fee Description	Fee Paid
Code	Code	(\\$)	Code	(\\$)	
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet.	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	920	217	460	Extension for reply within third month	
118	1,440	218	720	Extension for reply within fourth month	
128	1,960	228	980	Extension for reply within fifth month	
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17(q)	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify)

Other fee (specify)

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\\$)

SUBMITTED BY

Name (Print/Type)	Paul A. Mendonsa	Registration No. (Attorney/Agent)	42,879	Telephone	(503) 684-6200
Signature	<i>Paul A. Mendonsa</i>			Date	12/17/01

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2039.

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